VILLAGE of NORTHPORT

INCORPORATED IN 1894

224 Main Street, Northport, New York 11768, 631-261-7502, fax: 631-261-7521

Department of Buildings, Housing, and Code Enforcement

SOLAR PANEL CONSTRUCTION FILING INSTRUCTIONS

SOLAR PERMITS ARE ISSUED BY THE NORTHPORT FIRE MARSHAL AS PER 2020 IRC CODE

BUILDING PERMIT APPLICATION REQUIREMENTS:

Fill out **COMPLETELY** including Section Block Lot, Age of Structure, (4) photographs of all sides of structure; Owner's information, Applicant's information (if different), Scope of Work, including type of construction;

Estimated cost of work. INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

SQUARE FOOTAGE REQUIREMENTS: Supply square footage of proposed Panels: square footage of **typical panel**, **total number of panels**, and **total square footage of entire array layout**.

Tax Bill or Proof of Ownership--First and Last Page of Deed. Required.

Notarization. Owner and Applicant's signature notarized.

<u>Survey.</u> Submit (1) copy of current **original** guaranteed property survey.

Site Plan. (3) copies of site plan showing:

- proposed layout of panels on structure or free-standing configuration ON SITE PLAN
- LOCATE ALL PLUMBING VENTS ON ROOF. COVERING VENTS IS PROHIBITED!
- all setback distances called out from property lines, dwelling, and other accessory structures.

<u>Construction Drawings.</u> Executed and sealed by a NYS-licensed Professional Engineer detailing panel composition; anchoring detail(s), et.al. MUST BE BASED ON INFORMATION OBTAINED BY P.E. BY SITE VISIT OR OVERSIGHT OF P.E.'S EMPLOYEES/AGENTS, **NOT SOLAR COMPANY EMPLOYEES, as per NYS Education Law.**

P.E. PRE-CERTIFICATION ascertaining roof's capability of withstanding proposed construction load

<u>Contractor Insurance Certificates.</u> General Liability 2M/1M & Workmen's Comp/Disability on either the NYS Compensation Board form or State Fund. All insurance certificates must list the Inc. Village of Northport, 224 Main Street, Northport, NY 11768 as certificate holder.

CONTRACTOR AND ELECTRICIAN LICENSE-MANDATORY

Copy of Contractor's Suffolk County Home Improvement license & Suffolk County Electrician's license must be submitted.

BLANK CHECKS ARE NOT ACCEPTED - Fee determined after application review. PAY UPON ISSUE OF PERMIT.

CERTIFICATE OF COMPLETION REQUIREMENTS - After Permit Issued

- 1) P.E. Post-Construction Certification of the completed construction. Executed & sealed by NYS-licensed Professional Engineer who is an independent agent and not an employee or agent of Solar Company. Certification to be based on field inspection of finished work **PERFORMED BY SAID P.E.**
- 2) Electrical Inspection Certificate from a NYS-approved & Northport-accepted electrical inspection service.
- 3) Final Inspection by Building Inspector after completion of construction and receipt of items 1 & 2

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Contractors' Insurance Information

THE FOLLOWING FORMS ARE REQUIRED FOR LIABILITY, WORKERS' COMPENSATION, AND DISABILITY INSURANCE

- 1. LIABILITY INSURANCE WILL BE ACCEPTED ON THE ACORD FORM
- 2. WORKERS' COMPENSATION INSURANCE

Accepted on one of the following forms only*

Form C-105.2-Certificate of NY State Workers' Compensation Insurance Coverage

Form GSI-105.2 (2/02) Certificate of Participation in Workers' Compensation Group Board approved self-insurance

Form U-26.3-NY State Insurance Fund Certificate of Workers Compensation Insurance

3. DISABILITY INSURANCE

Accepted on the following form only*

Form DB-120.1-Certificate of Insurance Under the New York State Disability Benefits
Form DB-155 - Board-approved self-insured employers must obtain this form from Board's
Self-Insurance Office

Certificate Holder:

Inc. Village of Northport 224 Main Street Northport, NY 11768

EXEMPTION FORM — **NEW FORM CE-200** For each and every new or renewed permit a signed and dated form with a certificate number must be submitted.

Note: Form CE-200 Is an affidavit for New York Entities with No Employees and Certain Out of State Entities, That New York State Workers' Compensation and/or Disability Benefits Insurance Coverage Is Not Required

Any questions can be directed to:

New York State Workers Compensation Board 220 Rabro Drive Suite 100 Hauppauge, New York 11788 866-681-5354

Website: www.wcb.ny.gov

CERTIFICATIONS ARE ONLY ACCEPTED ON INDIVIDUAL FORMS

APPLICATION FOR SOLAR PERMIT

VILLAGE OF NORTHPORT, SUFFOLK COUNTY, NY

BUILDING PERMIT NO	ZBA No	Ar	ch. Rvw No			
DATE APPROVED	Planning Bd.No		SDEC No		C0/CC	
DATE APPROVED DIRECTOR		NY 			TOTAL \$	
ZONE	SCTM #0404	SECTION	ВЬОСК	LOT(S)	-	
DATE OF INITIAL CONSTR	UCTION:					
PRINCIPAL BUILDING	ACCESSORY BUILDING(S)	IF 10	<u>00 YEARS OR</u>	OLDER, HISTORIC REVI	<u>EW</u>	
APPLICATION MUST BE SI	JBMITTED SIMUL	TANEOUSLY	WITH BUILD	ING PERMIT APPLICATION	<u>NC</u>	
Submit documentation of	age & photos of	each elevation	on with this	application		
LOCATION OR ADDRESS						
Existing Buildings Used for:	Residential	Comme	rcial	Industrial		
Proposed Solar Panels to be In	stalled On:					
☐ Residence ☐ Garage	☐ Commercial	☐ Indust	rial	☐ Other Accessory Structure		
Proposed Project and Use:						
ESTIMATED COST OF PROJECT	\$					
PROPOSED SOLAR PANELS square for	ootages:					
Single Panel:s.f. T	otal Panel Array:	s.f.				
NOTES: 1. The 2020 IBEC/IRC Building Codes, NY 2. Building Permit issued subject to Sect Worker's Compensation Law. Proof of 3. Improvement contractors must be lic 4. Licensed by the Town of Huntington of The owner shall indemnify and hold the or property damage resulting from or ar losses arising out of the negligent acts o	ion 125 of General Municip of Compliance must be subn ensed pursuant to the code Chapter 153) and electricia municipality harmless and o ising directly or indirectly or omissions of the contractor	nal Law requiring Con nitted for issuance of of Suffolk County pr ns licensed by Suffol defend against any cl ut of or resulting fror	npliance with the M f Permit. rior to the issuance k County. Electricia laim of liability or lo m the permit holder ents, and any subcor	andatory coverage provisions of the of a building permit. Plumbers must I ns must provide separate Workers Coss including the cost of defense for personal separations within the municipality,	omp. ersonal injury	
STATE OF NEW YORK} SS: COUNTY OF SUFFOLK}						
Property in Name of (Individual or Corporation) PL	FASE PRINT	_				
Deposes and says: That he/she resides at		in the Sta	ato of	Zip Code that he is the owner in fe	20	
of all that certain lot, piece or parcel of land showr the said premises will be done in accordance with building permit, agrees to accept responsibility for	on the attached survey situate, lyithe approved application and according	ing and being within the In empanying plans, of which	corporated Village of No he is totally familiar; and	rthport; that the work proposed to be done upor	n	
Name of Applicant (PLEASE	PRINT)			he is duly authorized by the aforesaid owner		
to make application for a permit to perform said wo	rk in the foregoing application and	accompanying plans, and	I all the statements herei	n contained are true to deponent's own knowled	dge.	
(If Corpor	ation, give name of Corporation of	fice and address of its res	ponsible officers)		-	
And the undersigned is authorized to make this ap	olication on behalf of said owner.					
		Owner	Signatu	re		
		Address				
Sworn t before me this	day	Phone				
Of,	20	Applicant				
Notary Public				ure		
		Phone				